



Maternal and Child Health Access

Support the work of
MCH Access

by giving the gift of
health care, food support
and policy work that
makes lasting change!



In this monthly mailing:

OCTOBER IS BREAST
CANCER "AWARENESS
MONTH"

SUMMARY OF SEPT.
MEETING

THE L.A. MOMMIES AND
BABIES PROJECT (LAMB)
2012 DATA

PREGNANT WOMEN ISSUES
AND UPDATES - LYNN
KERSEY & LIZ RAMIREZ

COVERED CALIFORNIA AND
KAISER PERMANENTE
CHILD HEALTH PLAN

MY HEALTH L.A. OPENS
OCTOBER 11

ORGANIZATIONS FILE SUIT
ON MEDI-CAL BACKLOG

CONTRACEPTION DRIVES
DECLINE IN TEEN
PREGNANCY

Next MCH Access Monthly Meeting:

Thursday, October 16, 2014

10am - 12pm

LOCATION:

MCH Access

**Patricia Phillips Community Room
1111 W. 6th St., 3rd Floor
Los Angeles, CA 90017
(6th St., and Bixel St.)**

TOPIC:

**Propositions on the November ballot - What do they
have to do with health?**

**Tim Molina, Online Strategic Campaign Organizer
Courage Campaign**

Changes for Enrollment for 2014

New Laws Passed and Signed by Governor Brown

PARKING:

**Free at MCH Access; enter on 5th St. to 2-story
parking (between Lucas and Bixel) and walk across
the alley to our building**



**Please contact our office with any questions regarding this
email or visit our [website](#) for further information about our
organization.**

CONGRATULATIONS TO THE WOMEN'S FOUNDATION OF CALIFORNIA & THE WOMEN'S POLICY INSTITUTE DOMESTIC VIOLENCE TEAM!

POLL SHOWS CALIFORNIA SHIFTING ATTITUDE , STRONG SUPPORT ON ACCESS TO HEALTH CARE FOR ALL

STUDY: PRENATAL EXPOSURE TO SOME CHEMICALS MAY INCREASE RISK OF ASTHMA IN CHILDREN

CONTACT US

SAVE THE DATE

Friday, October 17, 8:30 AM - 5 PM Trauma-Informed Care: A National Conference for Helping Professionals. Sheraton Universal Hotel \$125, \$25 for CEUs. Information and registration at [HERE](#).

Friday October 24th and Saturday, October 25th, Second Annual G. Boutique Fundraiser. Black Women for Wellness
Black Women for Wellness is currently accepting donations of new and gently used clothing (Starting September 9th & Ending October 23rd) Monday - Friday 9:30am - 3:00pm You may drop off your unneeded items to our office, 4340 11th Ave. Los Angeles - 323-290-5955. (Please pre-wash clothing before donating)
Acceptable Items

Please Note: October is Breast Cancer "Awareness" Month

MCHA has traditionally featured an environmental or breast cancer prevention speaker at our October meeting, in recognition of our support for breast cancer prevention and of the environmental causes of cancer, especially breast cancer. This month we are featuring a review of the propositions because there is so much about health riding on their passage or failure.

However, please review the "**Think Before You Pink**" information [HERE](#) and see the trailer for "Pink Ribbons" [HERE](#). Billions of dollars have been raised through the tireless efforts of women and men devoted to putting an end to breast cancer. Yet, breast cancer rates in North America have risen to 1 in 8. "What's going on?" asks Barbara Brenner in Pink Ribbons, Inc. a new film now playing across Canada

Summary of September 18, 2014 meeting

Materials Distributed September 18 meeting may be found [HERE](#)

The LA Mommies and Babies Project (LAMB) 2012 Data - How are we doing in LA County? Chandra Higgins, MPH, Maternal and Child Health Programs, LA County Department of Public Health (See slides posted on our website.)

The LAMB Survey is an LA-County survey conducted every two years to identify factors associated with poor birth outcomes and look at the prevalence of certain maternal experiences before, during and after pregnancy. It helps fulfill the need for timely local data to help the health department and community partners better develop programs and policies and identify at risk populations. Surveys are sent to moms who live in LA County from 0-7 months after a live birth via stratified random sampling. Moms take the survey themselves but it can be administered by phone interview. Topics include preconception health, prenatal care, maternal medical conditions during pregnancy, as well as psychosocial factors such as stress, domestic violence, etc. Postpartum care and several questions about the baby are asked, such as well-baby checkups, breastfeeding and the baby's sleeping position.

In 2012, over 6,800 moms responded to the survey - a 62% adjusted response rate, which is very good for surveys. Latinas were the majority respondent, and the average age of the moms at delivery was 29 years. About 36% of women were uninsured before their pregnancy, which will change somewhat with the Affordable Care Act. A whopping 45% of women were obese prior to their pregnancy, and nearly 10% had periodontal disease even before their pregnancy. During pregnancy that rose to nearly 17%. More than 90% of moms entered prenatal care before their first trimester!

LAMB distinguishes itself with the variety and breadth of questions asked about social support and neighborhood conditions. Since many of the questions have been asked in the same way over years, trends can be shown, such as in the percentage of women who did not have enough money for food before pregnancy. This percentage has stayed at about 6-7% across the county. This

include:Shirts, Pants,
Dresses, Blouses, Hats,
Shoes, Jackets, Skirts,
Scarves Please contact Greg
for any additional
information

Greg@bwwla.com

323.290.5955

**November 12, 2014, 9AM -
12 Noon How Does It Feel?**

A First Hand Experience
of a Sensory Processing
Disorder Infant
Development Association of
California - South
Chapter. Held at the Braille
Institute, 741 N. Vermont
Ave. Los Angeles. For
further questions please
contact: Delora Slattery,
Infant Development
Association of
CA. mail@idaofca.org

Register [HERE](#)

Download PDF Registration
Form [HERE](#)

**Sat. Nov. 22 7 PM - and
Nov. 22-Dec. 6 - Benefit
Shopping for Maternal and
Child Health Access at "Ten
Thousand Villages"**

[Pasadena!Ten Thousand
Villages](#) in Pasadena, CA, is
a fair trade retailer of
artisan-crafted home decor,
personal accessories and
gift items from across the
globe. MCHA will be
sending flyers to use during
this time so that we receive
15% of purchase price
during that time period. In

percentage increases during pregnancy, however, to a high of over 11% countywide, and is worse for African American and Latina groups. ANY self-reported postpartum depression is rated at a shocking 47.3% - nearly half. Several coalitions and collaboratives to address these data have been formed, as interventions. Organizations are invited to request data, and to promote the LAMB survey to their constituents in several ways. Visit the LAMB site [HERE](#).

Pregnant Women Issues and Updates - Lynn Kersey and Liz Ramirez

MCHA reviewed what was in the September mailing; see it on our website for further details. The main points were:

1. Pregnant women in Full Scope Medi-Cal are being switched to pregnancy-related Medi-Cal due to Business Rules Engine issues in the state's computer. Get help if this happens to any of your clients.
2. A [Pregnancy Q and A](#) exists on Covered CA website. However good it may be at answering applicants' questions, MCHA does not think a list of questions and answers substitutes for good online application navigation and information about choices every step where decisions must be made. MCHA is creating a one-pager on this issue which should be available at our October 16 meeting. Currently the computer misinforms those pregnant women who are both Medi-Cal and Covered California-eligible or AIM and Covered California-eligible about their choices for enrollment. The computer screens to do NOT tell pregnant women that there is no tax penalty this year for choosing pregnancy-related Medi-Cal only and not choosing Covered CA with its premiums, co-pays and delivery costs.

Covered California and Kaiser Permanente Child Health Plan Open for Enrollment Nov. 15 for Enrollment starting January 1, 2015!

MCHA will bring as much as is known about what is new for the new enrollment period to our meeting Oct 16.

According to the Los Angeles Times, Covered California's doctor networks will stay limited in 2015, and there is no online way to find a doctor. Thus, the Los Angeles Times created it's own web database of [Covered CA doctors](#):

"Finding a doctor who takes Obamacare coverage could be just as frustrating for Californians in 2015 as the health-law expansion enters its second year.

The state's largest health insurers are sticking with their often-criticized narrow networks of doctors, and in some cases they are cutting the number of physicians even more, according to a Times analysis of company data. And the state's insurance exchange, Covered California, still has no comprehensive directory to help consumers match doctors with health plans.

This comes as insurers prepare to enroll hundreds of thousands of new patients this fall and get 1.2 million Californians to renew their policies under the Affordable Care Act.

addition, Ten Thousand Villages will be kicking off the Nov 22-Dec 6 benefit shopping window with a party in the store on Nov 22 at 7pm. We encourage our benefit shopping partners to attend. We will have music, food & drinks, and everyone who attends will have an opportunity to enter their organization into a drawing for an additional \$200 to their benefit shopping check.

Apply by Oct 31: B.I.R.T.H. (Birth Information and Resources for Teen Health) Mother-Mentor Program (Pilot Program)

This program provides pregnant and parenting teen mothers empowerment, education, one-on-one support and life and leadership coaching. Any clinics or social service agencies who work with pregnant and parenting teens or foster youth may refer interested program participants. As resources are limited, this service can be provided to a small group of girls at this time.

AWMNH is now recruiting six (6) teen mothers and mothers-to-be who would like to participate in this program. AWMNH currently has 2 openings and those chosen will receive a stipend for their participation. This is not a full time employment opportunity. If needed,

Even as California's enrollment grows, many patients continue to complain about being offered fewer choices of doctors and having no easy way to find the ones that are available." See full article [HERE](#).

My Health LA Opens October 1!

My Health LA is a no-cost health care program for people who live in Los Angeles County. It is for people age 6 and older and whose family meets certain income levels (click [HERE](#)) (138% and over of FPL). My Health LA is free to individuals and families who do not have and cannot get health insurance. Health care services are provided by non-profit clinics called "Community Partners". There are 164 Community Partner clinics in My Health LA. Participants should call the clinic to make an appointment to enroll and to make sure the clinic is taking new patients.

For more information, click [HERE](#). Note that participants must choose a clinic to enroll with, and may only enroll with the clinic. CECs conducting enrollment for other family members in Medi-Cal or another program cannot enroll in My Health LA.

Organizations File Suit on Medi-Cal Backlog

On Wednesday, Sept. 17 a coalition of legal organizations filed a lawsuit in Alameda County Superior Court over a backlog of Medi-Cal applications. The State Department of Health Services said that about 350,000 applications for the program had not yet been processed as of Sept. 1 -- down from 900,000 backlogged applications earlier this year. The lawsuit was filed by several groups, including:

- Bay Area Legal Aid;
- Central California Legal Services;
- Multiforum Advocacy Solutions;
- National Health Law Program; (see the [NHHELP release](#) on the lawsuit, 9/17).
- Neighborhood Legal Services of Los Angeles County; and
- Western Center on Law and Poverty

The suit calls for the court to require DHCS to determine Medi-Cal eligibility within 45 days of submission; notify applicants who are affected by the backlog that they can request a hearing on their application; and provide benefits to eligible applicants while their applications are being processed.

From the Guttmacher Institute: Contraception Drives Decline in Teen Pregnancy and Expanded Access to LARG Methods Could Accelerate this Trend

For the first time, the American Academy of Pediatrics (AAP) has recommended that pediatricians consider long-acting reversible contraceptive (LARC) methods—namely, hormonal and copper intrauterine devices (IUDs) and hormonal implants—as "first-line contraceptive choices for adolescents." [The statement, published in](#)

training may be provided. Deadline to apply is October 31, 2014;

Candidates will be selected for an interview to take place in November 2014. For more information click [HERE](#) or call 626-288-2191

EMPLOYMENT

Please click on job title to view full description and the application process. And provide a cover letter and resume with your application that specifically outlines your employment history experience and educational background for which you're applying. Please note: the job descriptions for the employment positions listed below will be posted on our website soon.

- [Human Resources Manager](#)
- [Administrative Assistant](#)
- [Project Coordinator - Pregnancy Policy](#)
- [Parent Coach, Level II - Welcome Baby Program](#)

[MCHA](#) is an Equal Opportunity Employer; women and people of color are strongly encouraged to apply.

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[the journal Pediatrics](#), encourages pediatricians to counsel their adolescent patients on the broad range of contraceptive methods, starting with LARC methods because they are easy to use and extremely effective. The new recommendations also encourage pediatricians to acquire the skills to provide these methods themselves or identify providers to whom they can refer patients.

In the United States, [614,000 teens became pregnant in 2010](#), and the overwhelming majority (82%) reported that their pregnancy was unintended. Despite the high level of unintended pregnancy, the overall U.S. teen pregnancy rate has declined steadily-in all 50 states and among all racial and ethnic groups-since its peak in 1990. Between 2008 and 2010, the rate dropped by 15%, a decline for which increased use of LARC methods among teens may be partially responsible.

Indeed, the evidence clearly shows that contraception is driving the long-term decline in U.S. teen pregnancy. As a [recent Guttmacher analysis highlights](#), contraception accounted for 86% of the decline in teen pregnancies between 1995 and 2002, while abstinence accounted for 14%. Between 2003 and 2010, the proportion of teens who had ever had sex did not change, indicating that abstinence did not play a role in the teen pregnancy declines during that time. However, teen contraceptive use continued to improve during this period. Highly effective LARC methods have the potential to help even more teens avoid unintended pregnancy. While still small, the proportion of teens using LARC methods is growing: Among women aged 15-19, LARC use increased substantially between 2002 and 2009, from less than 1% to 4.5%-and may have increased even more since that time.

LARC methods offer adolescents who want to avoid childbearing several advantages over other contraceptive methods. In particular, they may appeal to teens who do not want to worry about remembering to take birth control pills at the same time every day. LARC methods require little maintenance and can provide long-term protection during the years when many young women are at highest risk for unintended pregnancy, between when they [initiate sexual activity \(around age 17\) and when they have their first child \(around age 25\)](#). Indeed, [a new study released](#) in [the New England Journal of Medicine](#) documents the potential for LARC methods to significantly decrease pregnancy and abortion rates among teens.

Thanks to the Affordable Care Act, more women-including teens-now have private or public insurance coverage that funds contraception without out-of-pocket costs, which can otherwise be a critical barrier to use. Still, [other practical barriers stand in the way of teens' access to LARC methods, and many teens report they know little or nothing about them](#). The AAP's recommendation could go a long way toward increasing provider training and adolescents' awareness of LARC methods. As advocates and providers consider ways to improve access to LARC methods, it is important to be vigilant that such efforts fully respect

adolescents' informed consent, given the [historical context of coercive practices](#) related to contraception, especially those targeting disadvantaged groups. To ensure adolescents' choices are fully informed and completely voluntary, the new recommendations emphasize educating teens about all contraceptive methods that are safe and appropriate for them, so they can choose freely from among the range of contraceptive options, including highly effective LARC methods.

For more information:

Analysis: [Leveling the Playing Field: The Promise of Long-Acting Reversible Contraceptives for Adolescents](#)

Analysis: [What Is Behind the Declines in Teen Pregnancy Rates?](#)

Fact sheet: [American Teens' Sexual and Reproductive Health](#)

Report: [U.S. Teenage Pregnancies, Births and Abortions, 2010: National and State Trends by Age, Race and Ethnicity](#)

Infographic: [An American women's age at first sex has changed little over time, but she is now getting married later and having children later](#)

Analysis: [Guarding Against Coercion While Ensuring Access: A Delicate Balance](#)

The Guttmacher Institute works to advance sexual and reproductive health in the United States and worldwide through an interrelated program of social science research, policy analysis and public education designed to generate new ideas, encourage enlightened public debate and promote sound policy and program development. Learn more at [Guttmacher.org](#)

Congratulations to the Women's Foundation of California and the Women's Policy Institute Domestic Violence Team!

AB 1579 (Mark Stone, from Santa Cruz-Monterey) was signed by Governor Brown. Starting July 1, 2015, this bill will allow pregnant women to be eligible for CalWORKS in her 2nd trimester rather than waiting until her third! Note that this may also make a difference for her full-scope Medi-Cal if she is a first-time mom, and may mean a managed care enrollment packet is sent.

Poll Shows Californians Shifting Attitudes, Strong Support On Access To Health Care For All

Majority of Californians Support Extending Access to Health Care to Undocumented Californians Through Medi-Cal and Covered California
Sacramento, CA - Monday, Oct. 6, 2014

Although California has made significant headway to open pathways to health care, 1.4 million uninsured and undocumented Californians are left without access to affordable preventive care, leaving them to turn to emergency services when dire situations demand attention.

According to a new bipartisan [poll](#) commissioned by The California Endowment, a private, statewide health foundation, and conducted by Fairbank, Maslin, Maullin, Metz & Associates (FM3) and GS Strategy Group, more and more Californians feel that all Californians - including California's undocumented population - should have access to quality, affordable health care.

"California is a dynamic and innovative state. As our state grows, policy must shift to allow all of our families, friends, and neighbors to live healthy lives and continue to contribute to the state's well-being and economy" said Daniel Zingale, senior vice president, of The California Endowment. "It doesn't come as a shock that Californians would be willing to lead in the efforts to bring equal access to all."

This poll finds that:

In general, Californians show support for the state's health care options, as well as the Affordable Care Act. Medi-Cal - the state's low-income health program - received high marks from respondents with favorable returns at 69%. Covered California returned a 41% favorable to 18% unfavorable. The Affordable Care Act also returned high favorable results with 50% of participants noting general favorability.

Californians feel that access to health care is not a privilege, but a human right. By more than two-to-one (60% to 28%), voters say helping undocumented immigrants with health care is the "right thing to do," rather than denying public health benefits to undocumented immigrants.

Options to extend access to Undocumented Californians can build on the state's exchange and Medi-Cal. A majority of Californians approve expanding the state's current health coverage systems. Participants support making changes to Covered California (54% to 41%) and Medi-Cal (56% to 40%) to cover the undocumented. Access the full memo [HERE](#).

Study: Prenatal Exposure to Some Chemicals May Increase Risk of Asthma in Children

September 29, 2014

By Fran Kritz:

Researchers at the Mailman School of Public Health at Columbia University recently published a [study](#) that found a strong link between prenatal exposure to two phthalates, chemicals used in many household products, and development of childhood asthma.

The study found that kids born to mothers exposed during pregnancy to high levels of two phthalates, butylbenzyl phthalate (BBzP) and di-n-butyl phthalate (DnBP) had a 72 percent and 78 percent increase in risk of developing asthma between age 5 and 11, compared to kids born to mothers who were exposed to lower levels of the chemicals. "Our study presents evidence that these two phthalates are among a range of known risk factors for asthma," says Robin Whyatt, the lead author of the study and a professor of environmental health sciences at Mailman. Other risk factors for childhood asthma include exposure to tobacco smoke and air pollution, obesity, and a history of allergies, says Whyatt. Phthalates are used in many common household products such as plastic food containers, vinyl flooring, insect

repellent and shower curtains. Beginning in 2009, several phthalates-including BBzP and DnBP, were banned in many children's items such as toys. But according to the study authors, there has been little done to make pregnant women aware of the risks. The word phthalates is rarely included on chemical ingredient lists.

For the study, the researchers followed 300 pregnant women and their children and measured levels of exposure to four phthalates through urine tests done in the third trimester for the mothers and in the children at ages 3, 5 and 7 with testing done at the Centers for Disease Control and Prevention laboratories. The researchers compared asthma risk in the children between ages 5 and 11 year who were born to mothers with urine phthalate levels at the high levels and lowest levels. Almost a third of the children whose mother's tests showed high levels of exposure to phthalates developed asthma. Another 60 children had a history of wheeze and other asthma-like symptoms. Two of the phthalates studied, di-2-ethylhexyl phthalate (DEHP) and diethyl phthalate (DEP)-were not linked to children developing asthma.

The researchers say it's not clear what about the phthalates increases the risk of developing asthma in kids, but inflammation may be a factor. The study was published in Environmental Health Perspectives.

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